## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

## .

Applicant:

Christopher J. Edge

Filed:

Herewith

Docket No.:

1001-207US01

Title:

SOFT PROOFING SYSTEM

## **CERTIFICATE UNDER 37 CFR 1.10:**

"Express Mail" mailing label number: ET125673252US

Date of Deposit: December 31, 2001

I hereby certify that this paper or fee is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Commissioner for Patents, Washington, D.C. 20231.

By:\_

Name: Steven J. Shumaker

## REQUEST FOR PATENT APPLICATION UNDER 37 C.F.R. § 1.53(b)

**BOX PATENT APPLICATION** 

Commissioner for Patents Washington, D.C. 20231

Sir:

We are transmitting herewith the attached correspondence relating to this application:

Transmittal sheet containing Certificate of Mailing.

Utility Patent Application: Spec. 20 pgs; Claims 8 pgs; Abstract 1 pg.

The fee has been calculated as shown below in the "Claims as Filed" table.

15 sheets of formal drawings.

Signed Combined Declaration and Power of Attorney (3 pgs.)

Assignment including Recordation Form Cover Sheet, and fee of \$40.00.

Check in the amount of \$2,316.00: \$2,276.00 for filing fee and \$40.00 for assignment fee.

Return postcard.

**CLAIMS AS FILED** 

Number of Claims Filed	In Excess of:	Number Extra		Rate		Fee
Basic Filing Fee						\$740.00
Total Claims						
54	20	34	х	\$18.00	=	\$612.00
Independent Claims						
14	3	11	х	\$84.00	=	\$924.00
MULTIPLE DEPENDEN	T CLAIM FEE		·····	1		
TOTAL FILING FEE						\$2,276.00

Please apply any charges not covered, or any credits, to Deposit Account No. 50-1778.

If this application is found to be incomplete, or if a telephone conference would otherwise be helpful, please call the undersigned at (651) 735-1100.

Kindly acknowledge receipt of this application by returning the enclosed postcard.

Please send all correspondence to Practitioners at Customer Number 28863.



PATENT TRADEMARK OFFICE

Date:

12/28/01

SHUMAKER & SIEFFERT, P.A. 8425 Seasons Parkway, Suite 105 St. Paul, Minnesota 55125

Telephone: 651.735.1100 Facsimile: 651.735.1102

By:

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